

PTO/SB/01 (08-03)

Approved for use through 07/31/2008, OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 000340-002

First Named Inventor Markus MAIER et al.

COMPLETE IF KNOWN

Application Number Unassigned

Filing Date Herewith

Art Unit Unassigned

Examiner Name Unassigned

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TENSIONING DEVICE FOR STRIP-SHAPED TENSION MEMBERS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

August 16, 2003

as United States Application Number or PCT International

Application Number PCT/EP2003/009079 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
102 49 266.2	DE	October 23, 2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

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Name	
Address	
City	State ZIP
Country	Telephone Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.	
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
<u>Markus</u>	<u>Meier</u>
Inventor's Signature <u>Markus Meier</u>	Date <u>10/15/2004</u>
Residence: City <u>Stuttgart</u>	State Country <u>Germany</u> <u>DEX</u> Citizenship <u>German</u>
Mailing Address <u>Im Wolfar 47</u>	
City <u>70599 Stuttgart</u>	State ZIP Country <u>Germany</u>
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
<u>Hans-Peter</u>	<u>Andra</u>
Inventor's Signature <u>Hans-Peter Andra</u>	Date <u>11/24/2004</u>
Residence: City <u>Stuttgart</u>	State Country <u>Germany</u> <u>DEX</u> Citizenship <u>German</u>
Mailing Address <u>Im Betzengaiem 40</u>	
City <u>70597 Stuttgart</u>	State ZIP Country <u>Germany</u>
<input type="checkbox"/> Additional Inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.	

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PTO/SB/81 (06-04)

Approved for use through 11/30/2005. OMB 0651-0035

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Markus MAIER et al.
Title	TENSIONING DEVICE FOR ...
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	000340-002

I hereby appoint:



Practitioners associated with the Customer Number:

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Country

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Zip

Telephone

Fax

I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

SIGNATURE of Applicant or Assignee of Record (if assignee, put name, title and company name in the "Name" space below)

Name

Markus Maier

Signature

Markus Maier

Date

10/15/2004

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



*Total of 2 forms are submitted.

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PTO/SB/81 (06-04)

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	Unassigned
Filing Date	Herewith
First Named Inventor	Markus MAIER et al.
Title	TENSIONING DEVICE FOR ...
Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	000340-002

I hereby appoint:



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Individual Name

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Address

City

Country

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Telephone

Fax

I am the:



Applicant/Inventor.



Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE OF Applicant or Assignee of Record (If assignee, put name, title and company name in the "Name" space below)

Name	Hans-Peter Andra		
Signature	<i>Hans Peter Andra</i>		
Date	11/24/2004	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



*Total of 2 forms are submitted.

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